	YELD)	SE NOW AND AND ADDRESS OF THE PARTY OF THE P	Mary Co. Street, Stree	JBLIC HEALTH AND SOCIAL SERV	ICES	OIV.	
		DIV		F ENVIRONMENTAL HEALTH			Marri
	(bankt)		E TOTAL SPRING	LD CARE FACILITY PECTION REPORT			
REA	ASON IGRADE	Inspection D		ESTABLISHMENT NAME:	Have market	A 1 1 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ringin equip.
Regular	J	and the second s	2018	CSS- ALGE SHELTER POR	HOUSE	cutivo	24
Follow-U	2	Time in/Out: 3:25 Pm 4:00 Pm		OWNER/OPERATOR:			
Complain				CATHOUC CHAPITIES OF THE DIOC. OF AGAILY			
Investigat	tion RATING	a noo meddat ar	u eganya				
Other:	I A	Sanitary Permit No.: 20000-1100016		TAMUNING FOSTER GROUP DAY CARE			
	ann by 4 30 gallion			PERMIT STATUS: Valid Temporary Expired			
	dren: 7 Male 2			Child Care License: No.:1600% M	Valid /	/ Provisiona	/ / Expired
ne re Inspection	ollowing items identif or sooner as the De	y violations tou partment Indica	nd this da ates Non	ay in the operations and facilities whice compliance may result in downgradi	ch must l	be correcte	d by the next
3	a written	request for hea	aring mus	at be submitted before the indicated c	crrection	nnik susper ndate.	ision. To appea
ITEM*	REMARKS				DEMERIT CORRECT BY		
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38		veno 1211, lo seso	et chi suc	d se l l	A CONTRACTOR OF THE PARTY OF TH	23/11/19	AT MAKENTER
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in.	distance	masyma@agajiha	all monus	gr. in S. Dendente stadiosis	à apriliae	RI SHIP BOR	SHOOMING ST
				Thomas Tools	Lydhan		uts book at
I hav	e read and unders	tand the abov		on(s) and I am aware of the correct	tive me	asures to	be taken.
*Note:	When any of the f	ollowing items	s are	Received By (Name & Title):			
cited a	above, they shall be			SHELT	EK !	MOKK	EK
(2) (4)	10 days of this in			DEH Inspector (Name & Title): R-0210000 69H9 Om / V. RAYMUMO, CPHOX			
(4),	(6), (14), (21), (23), (24),	, (21), (20), (39) 8	k (40).	L-ALL DAME DE LIAI CALL	- FATIN	الم رسمان	יששור